DECLARATION AND POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below at 201 et seq. underneath my name.

I believe I am the original, first and sole inventor if only one name is listed at 201 below, or an original, first and joint inventor if plural names are listed at 201 et seq. below, of the subject matter which is claimed and for which a patent is sought on the invention entitled

RELAXIN-LIKE FACTOR AND METHODS AND USES THEREOF

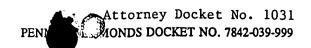
· ·	3 AND USES THEREO	ŗ				
the specification of which is attached hereto a the specification was filed in the United S with amendment(s) filed on	States on June 7, 1995	led of even date herewith -2s Application Ser	n unless one of the fo	ollowing t	ooxes is	checked:
the specification was filed as PCT internal PCT Article 19 on (if apple	tional application Serial N	0 0	n	_ and was	s amend	ed under
I hereby state that I have reviewed and under amendment referred to above.	stand the contents of the a	bove identified specifica	tion, including the c	laims, as	amende	d by any
I acknowledge the duty to disclose informatio §1.56.	n known to me to be mate	ial to patentability as de	fined in Title 37, Co	de of Fed	eral Reg	ulations,
I hereby claim foreign priority benefits under certificate listed below and have also identifie of the application on which priority is claime	d below any foreign appli	ode, §119(a)-(d) of any ation for patent or inven	foreign application(tor's certificate havi	s) for pat ng a filing	ent or ir g date be	ventor's fore that
EARLIEST FOREIGN APPLICAT	ION(S), IF ANY, FILED	PRIOR TO THE FILIN	G DATE OF THE	APPLIC	ATION	
APPLICATION NUMBER	COUNTRY	DATE OF I		PRIOR		
			YE	s 🗆	NO	
			YE	s 🗆	NO	
I hereby claim the benefit under Title 35, Un	nited States Code, §119(e)	of any United States p	rovisional applicatio	n(s) listed	below.	
APPLICATION NUMBER		FILING DATE				
			-			
						<u>.</u>

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application:

		STATUS			
APPLICATION SERIAL NO.	FILING DATE	PATENTED	PENDING	ABANDONED	

POWER OF ATTORNEY: As a named inventor, I hereby appoint S. Leslie Misrock (Reg. No. 18872), Harry C. Jones, III (Reg. No. 20280), Berj A. Terzian (Reg. No. 20060), Gerald J. Flintoft (Reg. No. 20823), David Weild, III (Reg. No. 21094), Jonathan A. Marshall (Reg. No. 24614), Barry D. Rein (Reg. No. 22411), Stanton T. Lawrence, III (Reg. No. 25736), Isaac Jarkovsky (Reg. No. 22713), Joseph V. Colaianni (Reg. No. 20019), Charles E. McKenney (Reg. No. 22795), Philip T. Shannon (Reg. No. 24278), Francis E. Morris (Reg. No. 24615), Charles E. Miller (Reg. No. 24576), Gidon D. Stern (Reg. No. 27469), John J. Lauter, Jr. (Reg. No. 27814), Brian M. Poissant (Reg. No. 28462), Brian D. Coggio (Reg. No. 27624), Rory J. Radding (Reg. No. 28749), Stephen J. Harbulak (Reg. No. 29166), Donald J. Goodell (Reg. No. 19766), James N. Palik (Reg. No. 25510), Thomas E. Friebel (Reg. No. 29258), Laura A. Coruzzi (Reg. No. 30742), Jennifer Gordon (Reg. No. 30753), Jon R. Stark (Reg. No. 30111), Allan A. Fanucci (Reg. No. 30256), Geraldine F. Baldwin (Reg. No. 31232), Victor N. Balancia (Reg. No. 31231), Albert P. Halluin (Reg. No. 25227), and Marcia H. Sundeen (Reg. No. 30893), whose address is Pennie & Edmonds, 1155 Avenue of the Americas, New York, New York 10036, and David Lowin (Reg. No. 29,326) whose address is Connective Therapeutics, Inc., 3400 West Bayshore Road, Palo Alto, Calfiornia, 94303, and each of them, my attorneys, to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith.





SEN	D CORRESPONDEN	NCE TO: PENNIE & EDMONDS 1155 AVENUE OF THI NEW YORK, N.Y. 100	E AMERICAS PENNIE	TELEPHONE CALLS TO: & EDMONDS DOCKETING 0-2803	
2 0 1	FULL NAME OF INVENTOR	LAST NAME Schwabe	FIRST NAME Christian	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	спу Charleston	STATE OR FOREIGN COUNTRY South Carolina	COUNTRY OF CITIZENSHIP U.S.A.	
	POST OFFICE ADDRESS	STREET 126 Baufine Street	Charleston	STATE OR COUNTRY ZIP CODE South Carolina 29401	
2 0 2	FULL NAME OF INVENTOR	LAST NAME Unemori	FIRST NAME Elaine	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	CITY Oakland	STATE OR FOREIGN COUNTRY, California	COUNTRY OF CITIZENSHIP U.S.A.	
	POST OFFICE ADDRESS	STREET -	CITY Oakland	STATE OR COUNTRY ZIP CODE California	
2 0 3	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	CITY	STATE OR COUNTRY ZIP CODE	
2 0 4	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	СІТУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	CITY	STATE OR COUNTRY ZIP CODE	
2 0 5	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	СПУ	STATE OR COUNTRY ZIP CODE	
2 0 6	FULL NAME OF INVENTOR	LAST NAME	FIRST NAME	MIDDLE NAME	
	RESIDENCE & CITIZENSHIP	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP	
	POST OFFICE ADDRESS	STREET	СПҮ	STATE OR COUNTRY ZIP CODE	

I hereby declare that all statements made herein of my own knowledge are trué and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202 Clause Mulman	SIGNATURE OF INVENTOR 203
7/3/ 195	6/28/95	DATE
SIGNATURE OF INVENTOR 204	SIGNATURE OF INVENTOR 208	SIGNATURE OF INVENTOR 206
DATE	DATE	DATE



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Schwabe, et al.

Serial No: 08/484,219

Filed:

June 7, 1995

: Group Art Unit: Not Yet Assigned

Examiner:

Not Yet Assigned

For:

RELAXIN-LIKE FACTOR AND METHODS AND USES THEREOF

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS [37 CFR 1.9(d) and 1.27(c)] - SMALL BUSINESS CONCERN

I declare that I am an official of the small business concern empowered to act on behalf of the concern, Connective Therapeutics, Inc., having an address at 3400 West Bayshore Road, Palo Alto, CA 94303.

I hereby declare that the above-identified small business concern qualifies as a small business concern as defined in 37 CFR 1.9(d), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates does not exceed 500 persons. I hereby declare that rights to the above-identified invention, have been conveyed (under contract or law) to and remain with Connective Therapeutics, Inc.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small lbusiness concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(d) or a nonprofit organization under 37 CFR 1.9(e). [*NOTE: Separate verified statements are required from each named person concern oroorganization having rights in the invention averring to their status as small entities. (37 CFR 1.27)]

NAME: Medical University of South Carolina

ADDRESS: 171 Ashley Avenue, Charleston, SC 29425

[] INDIVIDUAL [] SMALL BUSINESS CONCERN

[X] NONPROFIT ORGANIZATION-

I acknowledge the duty to file in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. [37 CFR 1.28(b)]

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of this application or any patent issuing thereon.

9/18/95

David A. Lowin

Vice President, Intellectual Property and Chief Patent Counsel

CONNECTIVE THERAPEUTICS, INC.

3400 West Bayshore Road Palo Alto, California 94303

PTO 129





IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of: Schwabe, et al.

Serial No:

08/484,219

: Group Art Unit:

Not Yet Assigned

Filed:

June 7, 1995

: Examiner:

Not Yet Assigned

For:

RELAXIN-LIKE FACTOR AND METHODS AND USES THEREOF

VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS [37 CFR 1.9(e) and 1.27(d)] - NONPROFIT ORGANIZATION

I declare that I am an official empowered to act on behalf of the nonprofit organization identified below

NAME OF ORGANIZATION:

Medical University of South Carolina

ADDRESS

171 Ashley Avenue, Charleston, South Carolina 29425

TYPE OF ORGANIZATION:

University

I hereby declare that the above-identified nonprofit organization qualifies as a nonprofit organization as defined in 37 CFR 1.9(e), for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code, and that rights to the above-identified invention, have been conveyed (under contract or law) to and remain with the above-identified nonprofit organization.

If the rights held by the nonprofit organization are not exclusive, each individual, concern or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as a small business concern under 37 CFR 1.9(d) or by any concern which would not qualify as a small business concern under 37 CFR 1.9(e). [*NOTE: Separate verified statements are required from each named person concern oroorganization having rights in the invention averring to their status as small entities. (37 CFR 1.27)]

NAME:

Connective Therapeutics, Inc.

ADDRESS:

3400 West Bayshore, Palo Alto, CA 94303

[] INDIVIDUAL

[X] SMALL BUSINESS CONCERN

[] NONPROFIT ORGANIZATION

NAME:

ADDRESS:

[] INDIVIDUAL

[] SMALL BUSINESS CONCERN

[] NONPROFIT ORGANIZATION

I acknowledge the duty to file in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate. [37 CFR 1.28(b)]

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of this application or/any patent issuing thereon.

SIGNATURE:

Dillard C. Marshall

DATE:

NAME OF PERSON SIGNING:

Dillard C. Marshall

TITLE IN ORGANIZATION:

Director, Research Administration

ADDRESS:

Medical University of South Carolina

171 Ashley Avenue

Charleston, SC 29425